

FILE NOW: FILING FEE AFTER MAY 1ST IS: \$550.00

FILED  
Apr 27, 1999 8:00 am  
Secretary of State

04-27-1999 90118 004 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # M82167

1. Corporation Name

B & D CORPORATION OF FLORIDA, INC.

Principal Place of Business

4015 E. HILLSBOROUGH AVE.  
TAMPA FL 33610

Mailing Address

~~4015 E. HILLSBOROUGH AVE.~~  
~~TAMPA FL 33610~~

P.O. Box 290175  
Tampa FL 33687-0175

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/19/1988

4. FEI Number

59-2889452

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 P.O. Box 290175

Suite, Apt. #, etc.

27 Tampa FLA

28 City & State

33687-0175

29 Zip

Country

30

Hillsborough

9. Name and Address of Current Registered Agent

DAVIS, ELAINE M.  
3909 N. STANLEY RD.  
PLANT CITY FL 33565

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

VD  
DAVIS, OLIVER WAYNE  
3909 N. STANLEY RD.  
PLANT CITY FL

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

T  
KARIE L. FRENCH  
24231 TWIN LAKE DR.  
LAND O' LAKES FL

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

S  
DAVIS, ELAINE M.  
3909 N. STANLEY RD.  
PLANT CITY FL

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

PD  
BAUCOM, JAMES L  
413 DEER PARK AVE  
TEMPLE TERRACE FL 33617

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13.

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

PD  
OLIVER WAYNE DAVIS  
3909 N. STANLEY RD.  
PLANT CITY FLA 33565

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

T  
OLIVER WAYNE DAVIS  
3909 N. STANLEY RD.  
PLANT CITY FLA 33565

☒ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

VD  
ELAINE M. DAVIS  
3909 N. STANLEY RD.  
PLANT CITY FLA 33565

☒ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

S  
ELAINE M. DAVIS  
3909 N. STANLEY RD.  
PLANT CITY FLA 33565

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-22-99 (813) 626-7586

CR2E034 (11/98)